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## Abstract:

There has been a highly significant increase in the number of patients with malignant mediastinal tumors in the last four decades. Since these lesions are infrequently encountered and there are very few reports in Iran concerning this issue, we performed this study to review our institutional experience of medias-tinal masses and to compare differences in the clinical spectrum between our study population and other patients studied by various reports. This was a retrospective, descriptive and cross sectional study conducted on 105 patients with mediastinal masses who underwent surgical resection over a 5-year period from 1999 to 2003 in three major hospitals in Tehran. A total of 105 patients with mediastinal masses including 65 males (62%) and 40 females (38%) with a mean age of 34 years (range,2-80 years) who had undergone surgery entered the study. Most mediastinal tumors (47%) were identified in the third and fifth decades of life and the most common malignancy during the first four decades of life was malignant lymphoma. Considering the location of mediastinal masses, the anterior mediastinum was the most common site (65%) followed by paravertebral sulci (21%) and visceral mediastinum (14%). The highest rate of malignancy was observed in visceral mediastinum (73% malignancy rate). Histopathologic evaluation of resected masses revealed twenty two types of tumors of which sixty percent were malignant. Nonspecific symptoms such as dyspnea (41%) and cough (40%) constituted the most presenting complaints. Twelve percent of patients were completely asymptomatic. The most common complication observed in this series of mediastinal masses was Superior Vena Cava (SVC) syndrome. There was no postoperative complication. Crude mortality rate of the whole series was 16%. The prevalence of tumors in our series varied from some previously published reports. We demonstrated definite differences in histologic distribution, age range, malignancy rate and diagnostic methods of mediastinal tumors between our study population and other reported cases which should be considered in the evaluation and planning of therapeutic modalities for mediastinal masses encountered in our current practice.

## Keywords:

Mediastinal mass , malignancy

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